IARI D - PEE(S) IRAHSHIII IAL

| 132 100 0 7 2005 | | | or <u>Fax</u> | (571) 273-2885 | or Patents ginia 22313-1450 | |
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| INSTRUCTIONS: This for appropriate. All further conditions indicated the same properties of maintenance fee normalization | should be used for transespondence including the selow or directed otherwises. | smitting the ISSU Patent, advance or in Block 1, by (a | E FEE and PUBL ders and notification) specifying a new | ICATION FEE (if requirement of maintenance fees correspondence address | uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sep. | hould be completed where correspondence address as arate "FEE ADDRESS" for |
| 20350 75 TOWNSEND AN TWO EMBARCAI EIGHTH FLOOR | E ADDRESS (Note: Use Block 1 for 90 08/11/2005 ND TOWNSEND AT DERO CENTER | any change of address) | | Note: A certificate o Fee(s) Transmittal, Ti papers. Each addition have its own certifical Ce I hereby certify that States Postal Service addressed to the Ma | f mailing can only be used fairs certificate cannot be used all paper, such as an assignme of mailing or transmission. Trifficate of Mailing or Transmits Fee(s) Transmittal is being with sufficient postage for fair il Stop ISSUE FEE address PTO (571) 273-2885, on the | or domestic mailings of the for any other accompanying ent or formal drawing, must smission g deposited with the United states mail in an envelope above, or being facsimile |
| SAN FRANCISCO, CA 94111-3834 | | | | Margaret K. Stephan (Depositor's name) | | |
| 11/08/2005 YPDLITE2 00000049 201430 10797206 | | | | Margant | Total | (Signature) |
| 01 FC:1501 1400.00 DA 02 FC:1504 300.00 DA 03 FC:8001 300.00 DA | | | | November 4, | 2005 | (Date) |
| APPLICATION NO. | | | FIRST NAMED INVI | ENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/797,206 | | | | i | 16869P-060210US | 4196 |
| TITLE OF INVENTION: DI | EFLECTION YOKE AND | CATHODE RAY 1 | TUBE DEVICE | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FI | BE . | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | provisional NO \$140 | | | \$300 | \$1700 | 11/14/2005 |
| EXAMINER | | ART UNIT | | CLASS-SUBCLASS | j | |
| VU, DAVID HUNG 28 | | | | 315-382000 | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME AND | RESIDENCE DATA TO B | E PRINTED ON T | HE PATENT (prin | t or type) | | |
| PLEASE NOTE: Unless recordation as set forth in | an assignee is identified be 37 CFR 3.11. Completion | elow, no assignee of this form is NO? | data will appear or I a substitute for fil | the patent. If an assiging an assignment. | nee is identified below, the o | locument has been filed for |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | |
| Hitachi, Ltd. Tokyo, Japan | | | | | | |
| Please check the appropriate | assignee category or catego | ries (will not be pri | inted on the patent) | : Individual 🖾 C | Corporation or other private gr | oup entity Government |
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| A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. | | | | | | • |
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| Authorized Signature | (let Cul | ull | - " | | November 4, 2005 | |
| Typed or printed name Robert C. Colwell | | | | Registration | 07 /01 | |
| . Hexandra, Virginia 22313-1 | 1430. | | | | the public which is to file (an minutes to complete, includi omments on the amount of til Trademark Office, U.S. Dep S. SEND TO: Commissioner displays a valid OMB contro | |

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